

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: W. David Conley)
Serial No.: 09/475,531)
Filed: December 30, 1999)
For: METHOD AND SYSTEM FOR)
CHARGING A SET ACTIVATION)
FEE FOR PAY TELEPHONE)
USAGE)

Group Art Unit: 2643

Examiner: Duc Nguyen

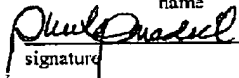
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Sheila Smedick

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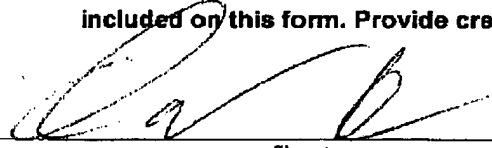
1-14-05

date

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION

Applicant respectfully requests entry of the following amendments and remarks contained herein in response to the Office Action mailed October 15, 2004. Applicant respectfully submits that the amendments and remarks contained herein place the instant application in condition for allowance.

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 99029 (BLL-0197)	
Applicant(s): W. DAVID CONLEY					
Application No. 09/475,531	Filing Date 12/30/1999	Examiner Duc Nguyen	Customer No. 36192	Group Art Unit 2643	Confirmation No. 6461
Invention: METHOD AND SYSTEM FOR CHARGING A SET ACTIVATION FEE FOR PAYING TELEPHONE USAGE					
COMMISSIONER FOR PATENTS:				RECEIVED CENTRAL FAX CENTER JAN 14 2005	
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	10 -	25 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	2 -	3 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 06-1130 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 Signature			Dated: January 14, 2005		
David A. Fox Registration No. 38,807 CANTOR COLBURN LLP 55 Griffin Road South Bloomfield, CT 06002 Telephone (860) 286-2929 Facsimile (860) 286-0115 Customer No. 36192			<div>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" (37 CFR 1.8(a)) on _____ (Date)</div> <div>_____ Signature of Person Mailing Correspondence</div> <div>_____ Typed or Printed Name of Person Mailing Correspondence</div>		
CC:					

P11LARGE/REV09